

**COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR  
BUSINESS LICENSE INVESTIGATION REPORT**

Account# 142236

Application for  
**ANNUAL DANCE**

Date  
04/15/15

Hearing Date

D.B.A. <b>No Limits Fitness</b>		Organization or Corporation <b>No Limits Fitness Inc</b>			Incorporation Date 02/13/13	
Address of Proposed Activity <b>342 1/2 N Ford Blvd Los Angeles CA 90023</b>		Contacted <b>Cecilia Kok</b>			Date Contacted 04/15/15	
Applicant, Sponsoring Adult or Corporate Officer <b>1. Cecilia Kok</b>		Position <b>C.E.O.</b>			Ever Arrested Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Address		Hgt.	Wgt.	Hair	Eyes	DOB
		Position			Ever Arrested	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address		Hgt.	Wgt.	Hair	Eyes	DOB
				<b>BROWN</b>	<b>BLUE</b>	
		Position			Ever Arrested	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address		Hgt.	Wgt.	Hair	Eyes	DOB
				<b>BROWN</b>	<b>BROWN</b>	
		Position			Ever Arrested	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address		Hgt.	Wgt.	Hair	Eyes	DOB
				<b>BROWN</b>	<b>BROWN</b>	
		Position			Ever Arrested	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address		Hgt.	Wgt.	Hair	Eyes	DOB
				<b>BROWN</b>	<b>BROWN</b>	
		Position			Ever Arrested	
					Yes <input type="checkbox"/> No <input type="checkbox"/>	
Location <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased <input type="checkbox"/> Sub-Leased From Whom: <b>SIYA Investment LLC</b>						
Termination Date of Lease 12/31/17		Immediate Vicinity <b>Commercial</b>		School or Churches <b>none</b>		Hearing Notice Posted
Charitable Activity <b>No</b>	Proposed Date of Activity When granted	Age Group <b>30-50 yrs</b>	Admission Charged <b>none</b>	Amount	Security Guards Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No.	
Estimated Attendance <b>30</b>	Posted Capacity <b>100</b>	Parking – Location <b>street</b>	Number <b>50</b>	Paved <b>yes</b>	Lighting <b>Adequate</b>	
Outside Signs <b>on bldg depicting DBA</b>					Interior Lightning <b>adequate</b>	
Alcoholic Beverages Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Type ABC License		ABC Licensed Issued To		
Location Previous Licensed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date 03/31/15		Applicant Previously Licensed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date		License Suspended, Revoked, or Denied Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date		
Type <b>Annual Dance</b>		Type		Type		
Date Started Operation 01/01/15		Billiard Tables Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Number		State Board Number n/a		
Attire n/a		Type of Food Served n/a		Entertainment (Describe) <b>Dance and Audio Equipment</b>		
Hours of Operation <b>8-10 am and 5-9pm m/f sat 8-am-3pm sun 8am-12pm</b>		Days of Operation		County License Number <b>142236</b>		

Description of Vehicles		Model	Vehicle License Number	County License Number
Year	Make			

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Color Scheme and Insignia on vehicles

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Schedule of Rates

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Additional Information

**J. Gomez**

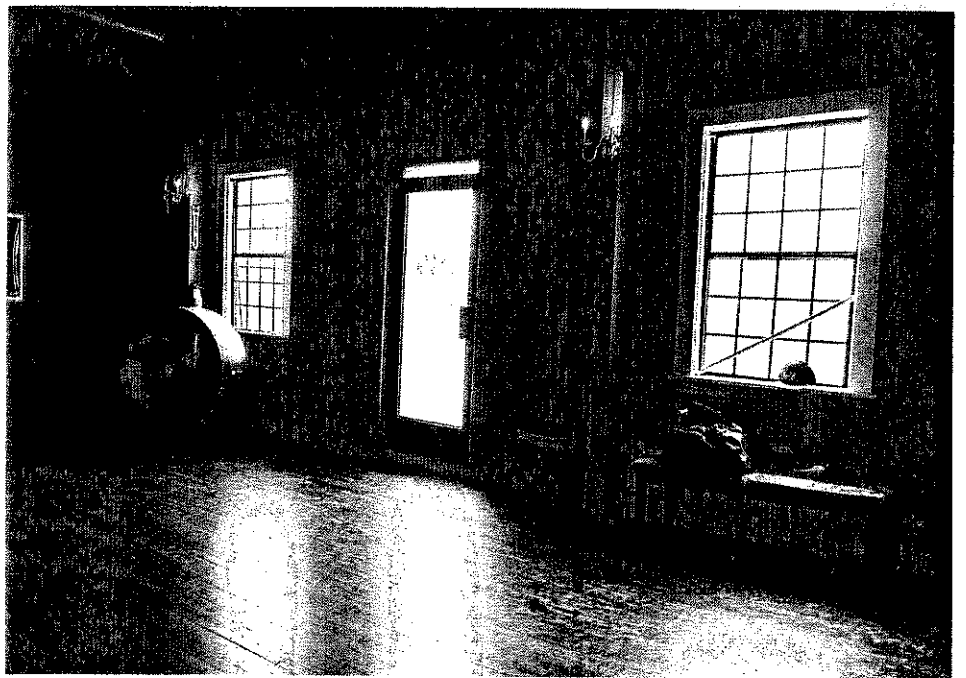
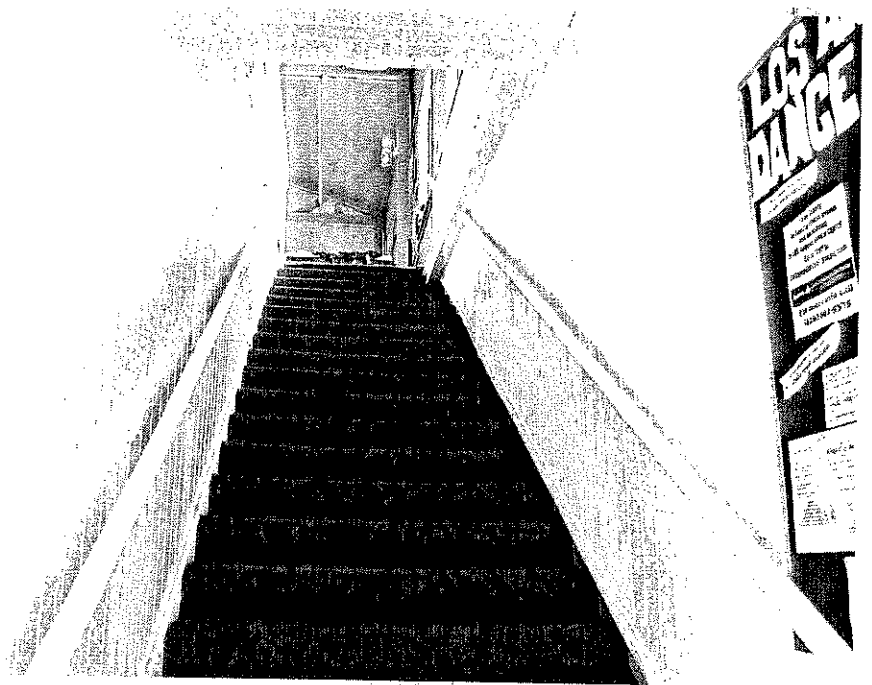
Investigated By

Date

Reviewed By

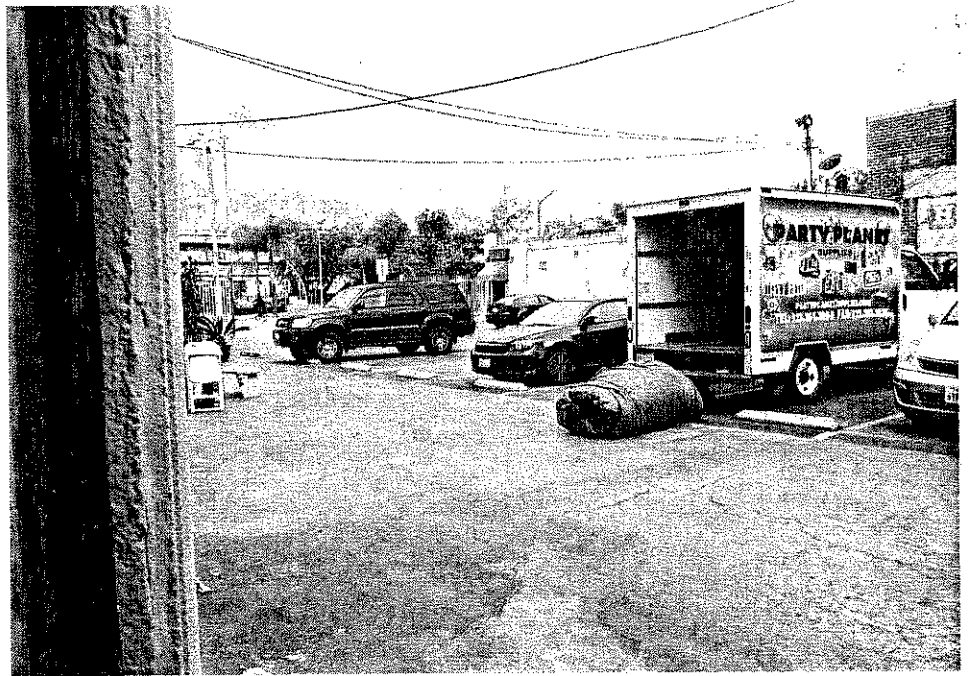
Date



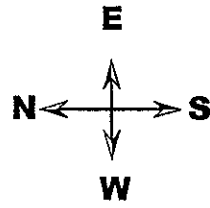




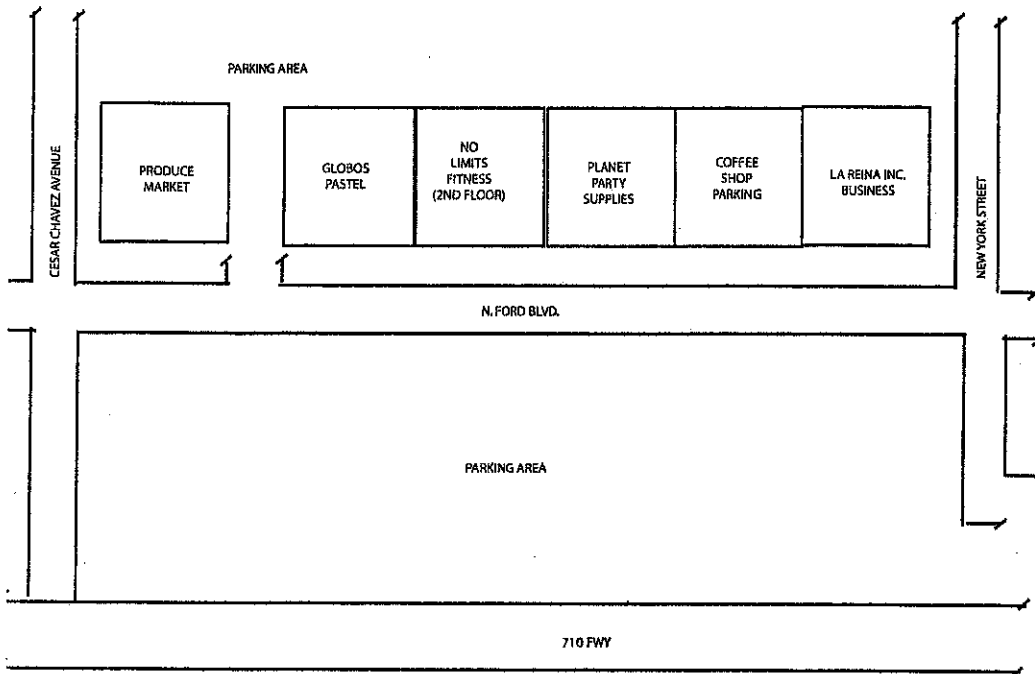




NO LIMITS FITNESS  
342 1/2 N. FORD BLVD.  
LOS ANGELES, CA 90022  
NOT TO SCALE  
BY: M. BEJARANO #2  
DATE: 04-24-2015

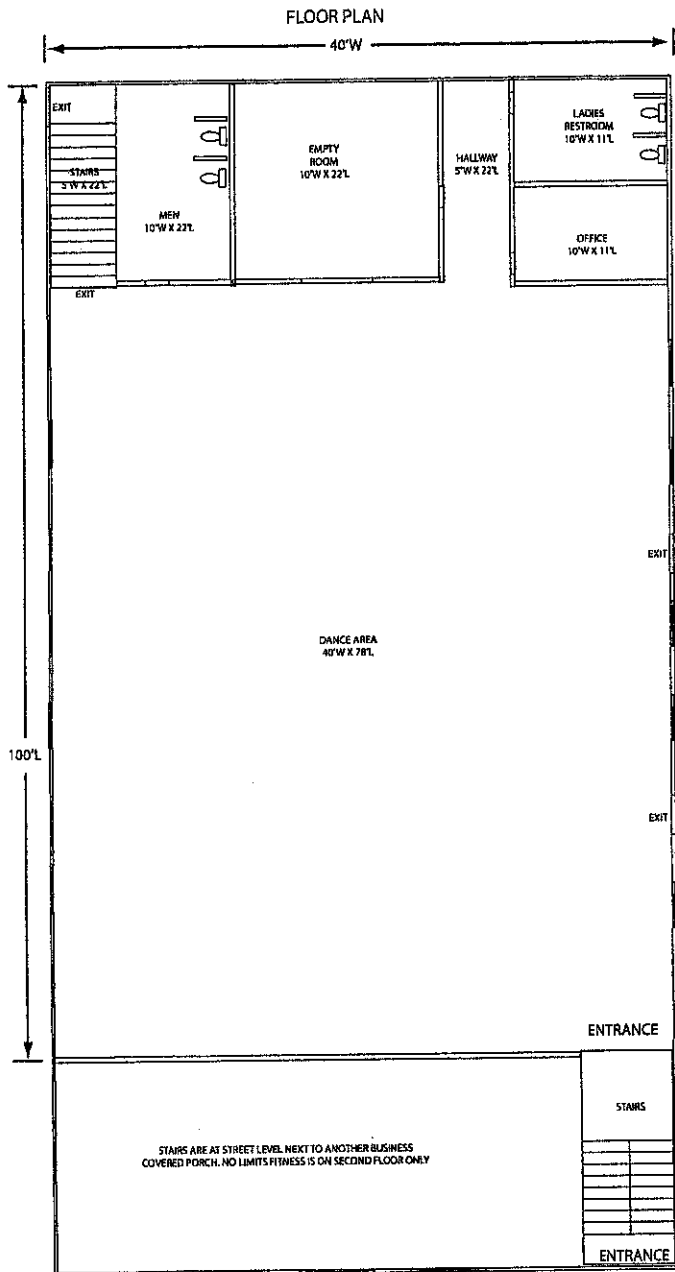
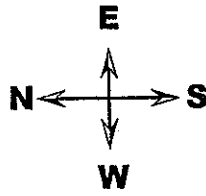


SITE PLAN





NO LIMITS FITNESS  
342 1/2 N. FORD BLVD.  
LOS ANGELES, CA 90022  
NOT TO SCALE  
BY: M. BEJARANO #2  
DATE: 04-24-2015





Los Angeles County Treasurer and Tax Collector  
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ \_\_\_\_\_

ID #

**H2236**

BUSINESS INFORMATION

Type of Business: <b>Dance</b>	Address of Business: 342 1/2 N. Ford Blvd, Los Angeles, CA 90022	
	Business Telephone: 626-862-5375 / 626-823-3312	
DBA (Business Name): <b>No Limit Fitness</b>	Mailing Address: same as above	
Sellers Permit # (State Board of Equalization):		
Business Ownership Structure: Single Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> If LLC or Corporation, the information below is required:		
Date of Incorporation: <b>2/13/2013</b>	Incorporated in the State of: <b>California</b>	
Exact Corporate Name: <b>No Limits Fitness, Inc</b>		
Names of Officers	Addresses	Titles
<b>CECILIA KOK</b>	<b>342 1/2 N. Ford Blvd, LA CA 90022</b>	<b>CEO</b>
<b>RUBY PATINO</b>	<b>same as above</b>	<b>PRECIORNT</b>

APPLICANT INFORMATION

Applicant's Full Name: <b>CECILIA KOK</b>		
Home Address: [REDACTED]		
Home Telephone: [REDACTED]	Cell Phone: [REDACTED]	Email address: <b>caikay2@gmail.com</b>
Social Security #: [REDACTED]	Date of Birth: [REDACTED]	Place of Birth: [REDACTED]
Driver's License or State ID#: [REDACTED]		Expiration Date: [REDACTED]
Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>	Height: [REDACTED]	Weight: [REDACTED] Hair Color: [REDACTED] Eye Color: [REDACTED]

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the Business License applied for, I agree to submit any additional information that may be required, to conduct all phases of this Business License in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: **3/31/2015**

Applicant's Signature: **[Signature]**

Application taken by: **[Signature]**

Date: **3/31/2015**

\* If you suspect fraud or wrongdoing by a County of Los Angeles employee, report it to the fraud hotline at 1(800) 544-6861

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: **ANNUAL DANCE**

ADDRESS OF BUSINESS: **342 1/2 N FORD BLVD, LOS ANGELES, CA 90022**

TELEPHONE: **(626) 833-3312**

OWNER OF BUSINESS: **CECILIA PEIK-Y KOK**

CAL. DR. LIC.# : **A7140134**

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **NO LIMIT FITNESS**

MAILING ADDRESS: **342 1/2 N FORD BLVD, LOS ANGELES, CA 90022**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

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**BUSINESS LICENSE COMMISSION  
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_  


DATE: 9/9/15

BASIC LICENSE NO. **2020**

DATE **04/02/15**

IDENTIFICATION NUMBER **142236**



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL  
SUMMARY SHEET**

KIND OF BUSINESS: ANNUAL DANCE

ADDRESS OF BUSINESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

TELEPHONE: (626) 833-3312

OWNER OF BUSINESS: CECILIA PEIK-Y KOK

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: NO LIMIT FITNESS

MAILING ADDRESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	08/18/15	tchen
<input checked="" type="checkbox"/> 4. Fire Department	YES	05/06/15	tchen
<input type="checkbox"/> 5. Public Health			
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	07/15/15	tchen
<input checked="" type="checkbox"/> 7. Business License Commission			
<input type="checkbox"/> 8. Sheriff Department			
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	04/02/15	tchen
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	08/20/15	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	04/14/15	tchen

Conditions:



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ANNUAL DANCE

ADDRESS OF BUSINESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

TELEPHONE: (626) 833-3312

OWNER OF BUSINESS: CECILIA PEIK-Y KOK

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: NO LIMIT FITNESS

MAILING ADDRESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**BUILDING & SAFETY**

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: [Signature]

DATE: 10 AUG 15



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ANNUAL DANCE

ADDRESS OF BUSINESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

TELEPHONE: (626) 833-3312

OWNER OF BUSINESS: CECILIA PEIK-Y KOK

CAL. DR. LIC.# : [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: NO LIMIT FITNESS

MAILING ADDRESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT**

**LA COUNTY**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: 4-30-15



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ANNUAL DANCE

ADDRESS OF BUSINESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

TELEPHONE: (626) 833-3312

OWNER OF BUSINESS: CECILIA PEIK-Y KOK

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: NO LIMIT FITNESS

MAILING ADDRESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**TREASURER & TAX COLLECTOR  
LA COUNTY**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

*James Grogan*

DATE: 7-15-15

COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR  
BUSINESS LICENSE SECTION  
REVENUE & ENFORCEMENT DIVISION

TO: DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET, 13<sup>TH</sup> FLOOR, ROOM 1360  
LOS ANGELES, CALIFORNIA 90012

FROM: BUSINESS LICENSE SECTION  
225 NORTH HILL STREET ROOM 109  
LOS ANGELES, CALIFORNIA 90012

DEPARTMENT OF REGIONAL PLANNING FEE: ~~55.00~~  
\$365.00

TELEPHONE: (213) 974-2011  
FAX: (213) 633-5427

DATE: March 11, 2015

ID#:

142236

TYPE OF BUSINESS AND CODE:

Annual Dance

BUSINESS ADDRESS: 342 1/2 N. Ford Blvd.

CITY: Los Angeles, CA 90022

APN#:

5235-005-005

NAME OF OWNER: No Limits Fitness, Inc

PHONE#:

(626) 833-3312

D.B.A./NAME OF BUSINESS: No Limit Fitness

CELL PHONE#:

(626) 862-5375

MAILING ADDRESS: 342 1/2 N. Ford Blvd, Los Angeles, CA 90022

E-mail ADDRESS:

To be completed by Regional Planning

RBUS

201500127

EXISTING USE: New ☒ Renewal ( )

PROJECT #

2015-00667

CELL PHONE #: (626) 862-5375

USE PERMITTED IN ZONE

CC

USE NOT PERMITTED IN ZONE:

APPROVED

☒

DENIED:

REMARKS:

Consistent w/ zoning

DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET, ROOM 1360  
HALL OF RECORDS  
LOS ANGELES, CALIFORNIA 90012

SIGNATURE:

JL

DATE:

3/30/15





**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ANNUAL DANCE

ADDRESS OF BUSINESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

TELEPHONE: (626) 833-3312

OWNER OF BUSINESS: CECILIA PEIK-Y KOK

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: NO LIMIT FITNESS

MAILING ADDRESS: 342 1/2 N FORD BLVD, LOS ANGELES, CA 90022

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**SHERIFF FINGERPRINT**

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: Approval

SIGNATURE: M. Hansen #446375 DATE: 4-13-15